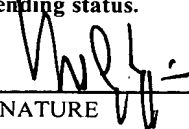


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| FORM PTO-1390 (Modified) U.S. PATENT AND TRADEMARK OFFICE; U.S. DEPARTMENT OF COMMERCE (REV. 07-2004) | | ATTORNEY'S DOCKET NUMBER EGAL-110 (66962-013) |
| TRANSMITTAL LETTER TO THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US) CONCERNING A SUBMISSION UNDER 35 U.S.C. 371 | | U.S. APPLICATION NO. (If known, see 37 CFR 1.5) 10/511385 |
| | | |
| INTERNATIONAL APPLICATION NO. PCT/US03/14885 | INTERNATIONAL FILING DATE May 9, 2003 | PRIORITY DATE CLAIMED May 9, 2002 |
| TITLE OF INVENTION GASTRIC BYPASS PROSTHESIS | | |
| APPLICANT(S) FOR DO/EO/US Thomas D. Egan | | |
| Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information: | | |
| <ol style="list-style-type: none"> 1. <input checked="" type="checkbox"/> This is a FIRST submission of items concerning a submission under 35 U.S.C. 371. 2. <input type="checkbox"/> This is a SECOND or SUBSEQUENT submission of items concerning a submission under 35 U.S.C. 371. 3. <input type="checkbox"/> This is an express request to begin national examination procedures (35 U.S.C. 371(f)). The submission must include items (5), (6), (9) and (24) indicated below. 4. <input checked="" type="checkbox"/> The US has been elected (Article 31). 5. <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371 (c) (2)) <ol style="list-style-type: none"> a. <input checked="" type="checkbox"/> is attached hereto (required only if not communicated by the International Bureau). b. <input type="checkbox"/> has been communicated by the International Bureau. c. <input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US). 6. <input type="checkbox"/> An English language translation of the International Application as filed (35 U.S.C. 371(c)(2)). <ol style="list-style-type: none"> a. <input type="checkbox"/> is attached hereto. b. <input type="checkbox"/> has been previously submitted under 35 U.S.C. 154(d)(4). 7. <input type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371 (c)(3)) <ol style="list-style-type: none"> a. <input type="checkbox"/> are attached hereto (required only if not communicated by the International Bureau). b. <input type="checkbox"/> have been communicated by the International Bureau. c. <input type="checkbox"/> have not been made; however, the time limit for making such amendments has NOT expired. d. <input checked="" type="checkbox"/> have not been made and will not be made. 8. <input type="checkbox"/> An English language translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371(c)(3)). 9. <input checked="" type="checkbox"/> An oath or declaration of the inventor(s) (35 U.S.C. 371 (c)(4)). 10. <input type="checkbox"/> An English language translation of the annexes to the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371 (c)(5)). 11. <input checked="" type="checkbox"/> A copy of the International Preliminary Examination Report (PCT/IPEA/409). 12. <input checked="" type="checkbox"/> A copy of the International Search Report (PCT/ISA/210). <p>Items 13 to 23 below concern document(s) or information included:</p> <ol style="list-style-type: none"> 13. <input checked="" type="checkbox"/> An Information Disclosure Statement under 37 CFR 1.97 and 1.98. 14. <input type="checkbox"/> An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included. 15. <input type="checkbox"/> A FIRST preliminary amendment. 16. <input type="checkbox"/> A SECOND or SUBSEQUENT preliminary amendment. 17. <input type="checkbox"/> A substitute specification. 18. <input checked="" type="checkbox"/> A power of attorney and/or change of address letter. 19. <input type="checkbox"/> A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 37 CFR 1.821 - 1.825. 20. <input type="checkbox"/> A second copy of the published International Application under 35 U.S.C. 154(d)(4). 21. <input type="checkbox"/> A second copy of the English language translation of the International Application under 35 U.S.C. 154(d)(4). 22. <input checked="" type="checkbox"/> Express Mail Label No. <u>EL 993 167 447 US</u> 23. <input checked="" type="checkbox"/> Other items or information: Return postcard | | |

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| U.S. APPLICATION NO (if known, see 37 CFR 1.53) * 10/511385 | | INTERNATIONAL APPLICATION NO. PCT/US03/14885 | | ATTORNEY'S DOCKET NUMBER EGAL-110 (66962-013) | |
| 24. The following fees are submitted:. | | | | CALCULATIONS PTO USE ONLY | |
| BASIC NATIONAL FEE (37 CFR 1.492(a)(1)-(5)) : | | | | | |
| <input type="checkbox"/> Neither international preliminary examination fee (37 CFR 1.482) nor international search fee (37 CFR 1.445(a)(2)) paid to USPTO and International Search Report not prepared by the EPO or JPO | | | | \$1110.00 | |
| <input type="checkbox"/> International preliminary examination fee (37 CFR 1.482) not paid to USPTO but International Search Report prepared by the EPO or JPO | | | | \$950.00 | |
| <input type="checkbox"/> International preliminary examination fee (37 CFR 1.482) not paid to USPTO but international search fee (37 CFR 1.445(a)(2)) paid to USPTO | | | | \$790.00 | |
| <input type="checkbox"/> International preliminary examination fee (37 CFR 1.482) paid to USPTO but all claims did not satisfy provisions of PCT Article 33(1)-(4) | | | | \$750.00 | |
| <input checked="" type="checkbox"/> International preliminary examination fee (37 CFR 1.482) paid to USPTO and all claims satisfied provisions of PCT Article 33(1)-(4) | | | | \$100.00 | |
| ENTER APPROPRIATE BASIC FEE AMOUNT = | | | | \$100.00 | |
| Surcharge of \$130.00 for furnishing the oath or declaration later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(e)). | | | | \$0.00 | |
| CLAIMS | NUMBER FILED | NUMBER EXTRA | RATE | | |
| Total claims | 50 - 20 = | 30 | x \$18.00 | \$540.00 | |
| Independent claims | 4 - 3 = | 1 | x \$88.00 | \$88.00 | |
| Multiple Dependent Claims (check if applicable). | | | <input type="checkbox"/> | \$0.00 | |
| TOTAL OF ABOVE CALCULATIONS = | | | | \$728.00 | |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2. | | | | \$364.00 | |
| SUBTOTAL = | | | | \$364.00 | |
| Processing fee of \$130.00 for furnishing the English translation later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(f)). | | | | \$0.00 | |
| TOTAL NATIONAL FEE = | | | | \$364.00 | |
| Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31) (check if applicable). | | | <input type="checkbox"/> | \$0.00 | |
| TOTAL FEES ENCLOSED = | | | | \$364.00 | |
| | | | | Amount to be refunded | \$ |
| | | | | charged | \$ |
| a. <input type="checkbox"/> A check in the amount of _____ to cover the above fees is enclosed. | | | | | |
| b. <input checked="" type="checkbox"/> Please charge my Deposit Account No. <u>50-1133</u> in the amount of <u>\$364.00</u> to cover the above fees. | | | | | |
| c. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>50-1133</u> | | | | | |
| d. <input type="checkbox"/> Fees are to be charged to a credit card. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | | | | |
| NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the International Application to pending status. | | | | | |
| SEND ALL CORRESPONDENCE TO: | | | | | |
| Mark G. Lappin, Reg. No. 26,618 McDermott Will & Emery LLP Customer No. 23630 28 State Street Boston, MA 02109 phone; 617-535-4000 fax: 617-535-3800 | | | | | |
|  SIGNATURE | | | | | |
| Mark G. Lappin NAME | | | | | |
| 26,618 REGISTRATION NUMBER | | | | | |
| 15 OCT 2004 DATE | | | | | |